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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/715,602		Filing Date 11/17/2003		To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL	ENTITY 🔲	OTHER THAN OR SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b), c	or (c))	N/A		N/A		N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), c	er (m))	N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p), o		N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		•		x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheed is \$25 addition	ts of pape 50 (\$125 onal 50 s	er, the application for small entitle theets or fractions	wings exceed 100 ation size fee due ity) for each ction thereof. See 37 CFR 1.16(s).					•	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						┛					
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	·
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	02/05/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 14	Minus	 20	= 0]	X\$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	 3	= 0		x \$ =		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT	3/26/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(1))	. 14	Minus	- 20	= 0	1	x \$ =		OR	x s =	
	Independent (37 CFR 1.18(h))	• 3	Minus	·· 3	= ()]	x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))					1					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							TOTAL ADD'L FEE	-4	OR COMMITTEE	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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